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Practitioner's Docket No. HW-7429

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patent No.: 7,282,822

Issued.: October 16, 2007

Name of Patentee: Tord Cedell

Title of Invention: SENSOR

**Certificate**  
JAN 18 2008  
**of Correction**

Commissioner for Patents

P.O. Box 1450

Alexandria, Virginia 22313-1450

ATTENTION: Decision and Certificate of Correction  
Branch of the Patent Issue Division

**REQUEST FOR CERTIFICATE OF CORRECTION OF PATENT  
FOR PTO MISTAKE (37 C.F.R. § 1.322(a))**

1. Attached, in duplicate, is PTO/SB/44 (also Form PTO-1 050), with at least one copy being suitable for printing.

**NOTE:** Form PTO-1050, using the column and line number in the printed patent, should be used exclusively regardless of the length or complexity of the subject matter. M.P.E.P. § 1485, 6th ed., rev. 3.

**NOTE:** The patent grant should be retained by the patentee. The PTO does not attach the certificate of correction to the patentee's copy of the patent. The patent grant will be returned to the patentee if submitted. M.P.E.P. § 1485, 6th ed., rev. 3.

2. The errors are shown correctly in the application file at the following locations:

Cover Page (73) Assignee: Covial Device AB, Helsingborg (SE)

**NOTE:** This information should be identified in this request, however, on Form PTO-1050, only the column and line number in the printed patent should be used. M.P.E.P. § 1485.

(Request for Certificate of Correction of Patent for PTO Mistake [14-1]--Page 1 of 1)

3. Please send the Certificate to:

**RECEIVED-USPTO**  
Patent Publication

JAN 18 2008

Name: James L. Tarolli

Address: Tarolli, Sundheim, Covell, & Tummino LLP  
1300 East Ninth Street Suite 1700  
Cleveland, OH 44114

(complete if applicable)

\_\_\_\_\_  
Signature(s) of patentee(s)

OR

\_\_\_\_\_  
(type or print name of assignee)

James L. Tarolli  
Signature of assignee or person authorized to  
sign on behalf of assignee

☐ Assignment recorded on

\_\_\_\_\_  
James L. Tarolli Reg. No. 36,029  
(type or print name of authorized person signing)

Reel: \_\_\_\_\_

Frame: \_\_\_\_\_

\_\_\_\_\_  
Attorney of Record  
Title of authorized person signing

☐ Recordal of assignment attached  
along with PTO-1595.

☐ Attached is a "Statement Under 37 CFR 3.73(b)," establishing the right of the  
assignee to take action in this case.

NOTE: "A certificate of correction, under 35 U.S.C. 254, may be issued at the request of the  
patentee or [the patentee's] assignee." 37 C.F.R. § 1.322(a). The certificate of correction can be  
signed by the attorney of record who acts on behalf of the inventor(s) or assignee(s).

(Request for Certificate of Correction of Patent for PTO Mistake !14-1]--Page 2 of 2)

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Name of Patentee: Tord Cedell

It is certified that error appears in the above-identified patent and that said Letters Patent  
is hereby corrected as shown below:

Cover Page (73) Assignee: Covial Device AB, Helsingborg (SE)

MAILING ADDRESS OF SENDER:

PATENT NO. 7,282,822

Tarolli, Sundheim, Covell, & Tummino, LLP  
1300 East Ninth Street Suite 1700  
Cleveland, OH 44114

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This Collection of information is required by 37 CFR 1.322, 1.323, and 1.324. The information is required to obtain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1.0 hour to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Attention Certificate of Corrections Branch, Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450.

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